



NATIONAL RESEARCH GROUP BACKGROUND CHECKS



NASSAU CENTER • SUITE 103 • 209 NASSAU STREET SOUTH • VENICE • FLORIDA • 34285



Authorization for The National Research Group Inc. to Conduct a Credit Inquiry

PERSONAL/BUSINESS CREDIT INQUIRY RELEASE

By my signature below, I hereby give consent to the

CHARLOTTE COUNTY LICENSING BOARD

to obtain a Personal/Business Credit Report(s) on me and/or my business.

I understand that the requested Personal and/or Business Credit Report(s) is (are) being obtained for the following specific purpose and for no other purpose:

— To determine eligibility for a license or other benefit granted by a government instrumentality which is required by law to consider an applicant's financial status or responsibility. —

▶▶▶ Please PRINT CLEARLY

Your Full Legal Name: _____

Social Security Number: _____ Date of Birth: _____

Current Address: _____

City-State-Zip: _____

Business Name: _____ FEIN: _____

Business Address: _____

▶▶▶ A Business Credit Report Is Ordered By Name & Address Exactly As You Print It Above

▶▶▶ Please SIGN with Full Legal Name, Phone, and Date Phone: _____

Signature: _____ Date: _____

The Fair Credit Reporting Act (FCRA) stipulates that anyone knowingly and willfully obtaining a credit report under false pretenses shall be fined up to \$5,000 or imprisoned for up to one year, or both.

▶▶▶ Please Check The Report(s) Being Ordered:

PERSONAL CREDIT REPORT - FEE- Each \$25.00 (Includes Handling and Mailing)

BUSINESS CREDIT REPORT - FEE- Each \$50.00 (Includes Handling and Mailing)

➔ MAIL Release with check payable to NRG Inc. to address above; or, complete Credit Card Authorization for MasterCard, Visa or Amex payment and MAIL to address above, or FAX to 941-488-8505, or E-MAIL to nrginfo@atlantic.net. Sealed Report(s) will be forwarded to you or directly to the DBPR as you request.

CREDIT CARD AUTHORIZATION: I hereby authorize The National Research Group Inc. to charge my (please circle one) MasterCard Visa Amex for services rendered.

Card Number: _____ Expiration Date: _____ / _____ / _____

Print Name (As Shown On Credit Card): _____

Signature (As Shown On Credit Card): _____

☎ 941-488-8500

800-531-6522

nrginfo@atlantic.net

941-488-8505

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(Please Note – This Completed and Signed Release Is Required)